

ENERGY INFRASTRUCTURE AND IMPACT OFFICE GRANT APPLICATION

City, county, township or other taxing district: _____

Contact Person/Title: _____

Daytime phone: _____

Address: _____

E-mail: _____

City, State, Zip: _____

Application Date: _____

If the information you entered here is different than the name and address we used on your most current correspondence **AND** if you want us to change our records to this information, please check here ☐

PART A:

What basic governmental service or function best describes this project? ("X" only one)

<input type="checkbox"/>	Education	<input type="checkbox"/>	Law Enforcement	<input type="checkbox"/>	Recreation
<input type="checkbox"/>	Emergency (fire, rescue, ambulance, etc)	<input type="checkbox"/>	Public Works (water, sewer, etc)	<input type="checkbox"/>	Transportation
<input type="checkbox"/>	Other				

What best identifies the focus of your project (i.e. a request for emergency services may be for vehicle or for equipment). ("X" only one)

<input type="checkbox"/>	Administration	<input type="checkbox"/>	Parks & Rec Facilities	<input type="checkbox"/>	Supplies/Materials
<input type="checkbox"/>	Airport Improvement	<input type="checkbox"/>	Personnel	<input type="checkbox"/>	Training
<input type="checkbox"/>	Building Construction	<input type="checkbox"/>	Planning/Engineering	<input type="checkbox"/>	Vehicles
<input type="checkbox"/>	Building Renovation	<input type="checkbox"/>	Rd/St Construction	<input type="checkbox"/>	Water, Sewer, Infrastructure Construction
<input type="checkbox"/>	Equipment	<input type="checkbox"/>	Rd/St Maintenance	<input type="checkbox"/>	Water, Sewer, Infrastructure Maintenance
<input type="checkbox"/>	Other				

What is the title of your project.(please limit this to just a couple words – there is a space for a full project description in Part D of this form)

Project Title is: _____

PART B:

Total anticipated cost of the project \$ ()

Amount requested from the Energy Infrastructure and Impact Office \$ ()

PART C: The following financial information must be provided to the department before a grant application can be acted upon.

- ☐ A copy of the most recent year end financial statements (audited if available), for the political subdivision applying. (townships, please provide a copy of page 1 of the annual Township Financial Report - Form F-66 (ND-3A)).
- ☐ A copy of the current budget for the political subdivision applying.
- ☐ Documentation showing the breakdown of all mills levied by the political subdivision applying during the current fiscal year, as well as the taxable valuation used to determine the mills levied.
- ☐ Documentation, if available, showing the projected cost of the project for which you are requesting a grant.

PART D: Narrative description of request

We certify that the information contained in this application is true and correct to the best of our knowledge as recorded in the official minutes of our _____ / _____ / _____ meeting, and we further certify
(month) (day) (year)
that any funds received by _____ as the result of this application
(City, county, township or other taxing district)
will be expended according to the laws of the State of North Dakota for the purpose stated in this application.

Signature

Signature

Title (Mayor, Chairman, President, etc.)

Title (Auditor, Clerk, Secretary, etc.)